U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of WILLIAM WHITE <u>and</u> DEPARTMENT OF THE AIR FORCE, McGUIRE AIR FORCE BASE, NJ

Docket No. 98-1898; Submitted on the Record; Issued January 6, 2000

DECISION and **ORDER**

Before MICHAEL J. WALSH, MICHAEL E. GROOM, BRADLEY T. KNOTT

The issue is whether appellant has established a right arm injury causally related to a May 22, 1996 employment incident.

In the present case, appellant filed a claim on September 25, 1996, alleging that he sustained an injury to his right arm when he fell while in the performance of duty on May 22, 1996. By decision dated March 11, 1997, the Office of Workers' Compensation Programs determined that the medical evidence was insufficient to establish an injury in the performance of duty on May 22, 1996. In a decision dated February 28, 1998, an Office hearing representative affirmed the March 11, 1997 Office decision.

The Board has reviewed the record and finds that appellant has not established an injury causally related to a May 22, 1996 employment incident.

An employee seeking benefits under the Federal Employees' Compensation Act¹ has the burden of establishing that he or she sustained an injury while in the performance of duty.² In order to determine whether an employee actually sustained an injury in the performance of duty, the Office begins with an analysis of whether "fact of injury" has been established. Generally "fact of injury" consists of two components which must be considered in conjunction with one another. The first component to be established is that the employee actually experienced the employment incident which is alleged to have occurred. The second component is whether the employment incident caused a personal injury, and generally this can be established only by medical evidence.³

¹ 5 U.S.C. §§ 8101-8193.

² Melinda C. Epperly, 45 ECAB 196, 198 (1993); see also 20 C.F.R. § 10.110(a).

³ See John J. Carlone, 41 ECAB 354, 357 (1989).

In this case, the Office accepted that appellant slipped and fell on a ramp while in the performance of duty on May 22, 1996. In order to meet his burden of proof, however, appellant must submit probative medical evidence on causal relationship between the incident and a diagnosed injury. The Board has held that medical evidence must be in the form of a reasoned opinion by a qualified physician based on a complete and accurate factual and medical history.⁴

In this case, the record contains numerous medical reports from Dr. Thomas G. Stackhouse, a surgeon, regarding treatment for carpal tunnel syndrome. In a report dated June 19, 1996, Dr. Stackhouse noted that appellant had been engaged in a lot of activities requiring elbow flexion, and he diagnosed a cubital tunnel syndrome. On July 31, 1996 Dr. Stackhouse noted pain and numbness from the elbow to the ring and small fingers. On October 31, 1996 appellant underwent two surgical procedures, a right carpal tunnel release and a submuscular ulnar nerve transposition of the right elbow. Dr. Stackhouse continued to provide treatment for the ulnar nerve condition, but he did not mention a fall at work until he noted in a January 15, 1997 report that appellant had called to his attention "two events that he was involved in the [s]pring of 1996 whereby he fell injuring his elbow." He did not provide an additional history of injury.

In a detailed report dated October 16, 1997, Dr. Stackhouse provided a history without noting a May 22, 1996 employment incident. In a report dated November 5, 1997, Dr. Stackhouse reported that appellant did sustain blunt trauma to his elbow in April and May 1996. He stated that the ulnar nerve is subcutaneous and can easily be traumatized by a blunt trauma, and "the mechanism of injury is quite consistent with the symptoms that he subsequently experienced and certainly was an aggravating factor in the manifestation of his upper extremity neuropathy."

As noted above, a medical report must be based on a complete factual and medical history. Dr. Stackhouse refers to blunt traumas in April and May 1996, without providing additional detail or demonstrating that he was aware of the specific circumstances surrounding the May 22, 1996 employment incident. In addition to the lack of a complete factual and medical background, Dr. Stackhouse did not clearly explain the nature and extent of any aggravation of a right arm neuropathy caused by the May 22, 1996 employment incident. Accordingly, the Board finds that appellant has not submitted sufficient medical evidence to meet his burden of proof in this case.

The decision of the Office of Workers' Compensation Programs dated February 28, 1998 is affirmed.

Dated, Washington, D.C. January 6, 2000

⁴ Robert J. Krstyen, 44 ECAB 227, 229 (1992).

⁵ The record indicates that appellant has a separate claim for a carpal tunnel syndrome that is not before the Board on this appeal.

Michael J. Walsh Chairman

Michael E. Groom Alternate Member

Bradley T. Knott Alternate Member